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PTO/SB/01 (12-97)
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	JAB 1409 -PCT-USA
	First Named Inventor	Eddy J. E. Freyne
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Group Art Unit	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INTERLEUKIN-5 INHIBITING 6-AZAUACIL DERIVATIVES

the specification of which
☐ is attached hereto
OR
☒ was filed on (MM/DD/YYYY) September 14, 1999 as United States Application Number or PCT International Application Number PCT/EP99/06776 and was amended on (MM/DD/YYYY) (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
98203148.6	EP	09/18/1998	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

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As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number
Steven P. Berman	24,772	Michael Stark	32,495
Andrea L. Colby	30,194	Ellen C. Coletti	34,140
		Mary A. Appollina	34,087

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label

OR ☒ Correspondence address below

Name	Philip S. Johnson				
Address	Johnson & Johnson				
Address	One Johnson & Johnson Plaza				
City	New Brunswick	State	NJ	ZIP	08933-7003
Country	USA	Telephone	(732) 524-2359	Fax	(732) 524-2808

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Eddy Jean Edgard		Freyne			
Inventor's Signature				Date	
Residence: City	Rumst	State		Country	Belgium
				Citizenship	BE
Post Office Address	c/o Janssen Pharmaceutica N.V., Turnhoutseweg 30, B-2340 Beerse, Belgium				
Post Office Address					
City	Rumst	State		ZIP	2840
				Country	Belgium

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Jean Fernand Armand

Lacrampe

Inventor's
Signature

Date

02/20/01

Residence: City

State

Country

France

Citizenship

FR

Post Office Address
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Cedex 9, France

Post Office Address

City

Le Mesnil-Esnard

State

ZIP

76240

Country

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Name of Additional Joint Inventor, if any:

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Given Name (first and middle [if any])

Family Name or Surname

Frederik Dirk

Deroose

Inventor's
Signature

Date

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Post Office Address

City

Drogen

State

ZIP

9031

Country

Belgium

Name of Additional Joint Inventor, if any:

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Given Name (first and middle [if any])

Family Name or Surname

Marc Gaston

Venet

Inventor's
Signature

Date

02/20/01

Residence: City

State

Country

France

Citizenship

FR

Post Office Address
c/o Janssen-Cilag S.A., 1, rue Camille Desmoulins, TSA 91003, Issy-les-Moulineaux
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Given Name (first and middle (if any))		Family Name or Surname			
Eddy Jean Edgard		Freyne			
Inventor's Signature				Date	9 February 2001
Residence: City	Rumst	State		Country	Belgium
				Citizenship	BE
Post Office Address	c/o Janssen Pharmaceutica N.V., Turnhoutseweg 30, B-2340 Beerse, Belgium				
Post Office Address					
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				Country	Belgium

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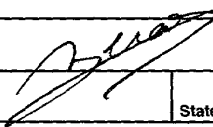
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Given Name (first and middle (if any))		Family Name or Surname			
Jean Fernand Armand		Lacrampe			
Inventor's Signature				Date	
Residence: City	State	Country	France	Citizenship	FR
Post Office Address	c/o Janssen-Cilag S.A., 1, rue Camille Desmoulins, TSA 91003, Issy-les-Moulineaux Cedex 9, France				
Post Office Address					
City	Le Mesnil-Esnard	State	ZIP	76240	Country France
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
Frederik Dirk		Deroose			
Inventor's Signature				Date	9 February 2001
Residence: City	State	Country	Belgium	Citizenship	BE
Post Office Address	c/o Janssen Pharmaceutica N.V., Turnhoutseweg 30, B-2340 Beerse, Belgium				
Post Office Address					
City	Drogen	State	ZIP	9031	Country Belgium
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
Marc Gaston		Venet			
Inventor's Signature				Date	
Residence: City	State	Country	France	Citizenship	FR
Post Office Address	c/o Janssen-Cilag S.A., 1, rue Camille Desmoulins, TSA 91003, Issy-les-Moulineaux Cedex 9, France				
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